

ATTORNEY OR PARTY WITHOUT ATTORNEY : TELEPHONE NO. (Name and Mailing Address)	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR ATTORNEY BAR #	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE:	
Title of Case (Abbreviated):	CASE NUMBER
PETITION FOR COMPROMISE OF DISPUTED CLAIM OF MINOR <input type="checkbox"/> Under Section 3500 P.C. (NO ACTION PENDING) <input type="checkbox"/> Under Section 372 C.C.P. (ACTION PENDING) <input type="checkbox"/> Special Needs Trust Requested	

The petition of _____

Parent / Guardian / Guardian Ad Litem

hereinafter called "petitioner," respectfully alleges:

1. Name of Minor _____
2. Age: _____ Date of Birth: _____ Sex: _____
3. Residence of Petitioner: _____
4. Residence of Minor: _____ County of _____
5. Date of Accident: _____
6. Place of Accident: _____
7. ☐ Petitioner is the _____, and has the care and custody of said minor.
8. Petitioner's Social Security Number is _____
 and Petitioner's California Driver's License Number is _____.
9. ☐ Action has NOT been filed on this claim. ☐ Action has been filed on this claim.
10. As a result of said accident, said minor has a disputed claim for damages against _____

The named defendants have assets to cover this claim ☐ Yes ☐ No

Claim Number _____ Insuring Agency _____

Address _____

denies liability for the injuries and damages suffered by said minor, but by way of compromise has offered to pay the sum hereinafter stated in consideration of a full and final dismissal of all claims of said minor arising from said accident.

Insurance Agency ☐ admits coverage ☐ denies coverage ☐ is proceeding on reservation of rights.

(over)

11. The injuries sustained by said minor as a result of said accident were as follows: (describe) _____

12. Said minor received the following treatment for said injuries: (give names of doctors and brief statement of facts re
h o s p i t a l i z a t i o n o r o t h e r
treatment) _____

13. Petitioner is informed and believes that said minor has completely recovered from the effects of said injuries and that there is
no permanent injury except: (here state facts concerning any continuing complaint or permanent injury. Unless injuries are
clearly superficial, the court may require the filing of a recent report by the examining or attending physician.)

14. Petitioner has made a careful and diligent inquiry and investigation to ascertain the facts relating to said accident, the
responsibility therefor, and the nature, extent and seriousness of said minor's injuries. Petitioner fully understands that if the
compromise herein proposed is approved by the Court and is consummated, said minor will be forever barred and otherwise
prevented from seeking any further recovery of compensation, even though said minor's injuries might in the future prove to
be more serious than they are now thought to be.

15. (a) ☐ Petitioner hereby recommends this compromise settlement to the Court as being fair, reasonable, and in the best
interests of said minor.

(b) ☐ By way of settlement, defendant has offered to pay \$_____ in consideration of a dismissal with
prejudice and petitioner hereby recommends this compromise settlement to the Court as being fair, reasonable, and in the best
interests of the minor.

16. The following items or expenses have been incurred or paid, are reasonable, resulted from said accident, and should be paid
out of the proceeds of settlement:

(a) Filing fees and other legal costs: \$ _____
(b) Attorney fees to _____ \$ _____

Attorney fees should not be greater than 25% of the settlement amount after filing fees and other legal costs are subtracted
pursuant to Orange County Superior Court Rule 414.

(c) Reimbursement for other expenses actually paid by petitioner and not reimbursed or reimbursable to petitioner from
insurance or other funds: (itemize) _____

Subtotal \$ _____

(d) Unpaid medical or hospital bills not reimbursable to petitioner from insurance or other funds. State each item by naming person or institution to whom owing and amount of each item. _____

Subtotal \$ _____

(e) Other (specify) _____

Subtotal \$ _____

GRAND TOTAL OF ALLOWANCES FOR FEES AND EXPENSES \$ _____

17. The total amount offered in settlement of said minor's claim is the amount of \$ _____

18. The minor does / does not have a disability which constitutes a substantial handicap as defined in Probate Code , section 3604(b) (Special Needs Trust).

19. The balance of the settlement sum, to wit _____, is to be deposited: \$ _____

☐ in a federally insured blocked interest-bearing account _____
(Name and Address of Depository)

☐ With the Clerk of the Superior Court for deposit with the County Treasurer in an interest-bearing trust fund pursuant to Probate Code section 3611(b).

☐ In a structured settlement / annuity for said minor, not to be withdrawn or otherwise invested without an order of court first obtained. Check or draft to show such endorsement.

☐ Annuity to be purchased from: _____ Company.

Rated _____ by: ☐ Best ☐ Standard & Poor's ☐
Other _____

☐ Said Company is licensed to do business in California, and currently has an _____ rating.

☐ Said company is **not** licensed to do business in California but **is** licensed in a state with an Insurance Guarantee Fund which protects residents of the State of California, and currently has an _____ rating.

☐ Court authorized special needs trust pursuant to Probate Code section 3604. (Petition under PC 3604 requires notice pursuant to PC 3602(e)(f). A copy of the proposed special needs trust is attached as Exhibit _____. Court to determine bond amount, _____ blocked account or County Treasurer Trust Fund status.

The balance of the settlement sum is to be made available to the minor: ☐ on the minor's eighteenth (18th) birthday.

☐ under the following conditions:

(over)

WHEREFORE, petitioner prays that the Court make its order approving said compromise, and for such other and further order as the Court may deem reasonable and proper.

Date: _____

Petitioner

I declare under the penalty of perjury under the laws of the state of California that the foregoing is true and correct except as to those matters which are stated to be upon information and belief, and as to those matters, I believe them to be true.

Date: _____

(Signature of Petitioner)

DISCLOSURE OF ATTORNEY'S INTEREST REQUIRED BY RULE 241(b) C.R.C.

This petition was prepared by _____, representing _____.
Said counsel hereby represents to the Court that (s)he did / did not become concerned with this matter at the instance of the party against whom the claim of said minor is asserted and that (s)he has not received, and does not expect to receive, any compensation for his/her services in connection herewith from any person other than the party whom he represents as herein stated, or the insurer of such party.

Counsel also represents to the Court that the minor does / does not have a disability which constitutes a substantial handicap as defined in Probate Code, section 3604(b) (Special Needs Trust).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(Signature of Attorney)